

JUDGMENT STATEMENT AFFIDAVIT

I, _____, _____
Name Street

_____ do hereby certify that
City Zip Code

I have no judgments against me in the County of _____ which I reside or any other County in South Carolina.

Signature

Date

Sworn and subscribed before me this
_____ day of _____, 20_____

Notary Public for South Carolina

Commission expires: _____